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UTILITY PATENT APPLICATION TRANSMITTAL Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	684.3179	Ē.
First Na	med Inventor or Application Identifier	

MASAMI TSUKAMOTO

			Express Mail I	abelivo.		40° =
See MPE	APPLICATION ELEMEN EP chapter 600 concerning utility patent ap		ADDR	ESS TO:	Box Patent	oner for Patents Application n, DC 20231
1. X	Fee Transmittal Form (Submit an original, and a duplicate for fee pr	ocessing)	7.	CD-ROM or C	•	large table or Computer
2.	Applicant claims small entity status. See 37 CFR 1.27.		8.	Nucleotide an		Sequence Submission
3. X	Specification Total Pag	res 38		a. Co	mputer Readable	Form (CRF)
4. X	Drawing s) (35 USC 113) Total She	ets 6			on Sequence Listi D-ROM or CD-R (
5.	Oath or Declaration Total Page	nes		ii. pa	per	
 	a. Newly executed (original or co	py)	Γ		atements verifying	identity of above copies
	b. Copy from a prior application ((for continuation/divisional with		9.		apers (cover sheet	
	i. DELETION OF INV	ENTOR(S)	10.	37 CFR 3.73(t (when there is	o) Statement s an assignee)	Power of Attorney
			see 11.	English Trans	slation Document ((if applicable)
61 X	Application Data Sheet. See 37 CFR 1.7	6	12.	Information D Statement (ID		Copies of IDS Citations
\$ ===			13.	Preliminary A	mendment	
			14. X		ot Postcard (MPE pecifically itemized	
			15.		y of Priority Docum	nent(s)
			16.		•	
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17. If a (CONTINUING APPLICATION, check appl ———————————————————————————————————	ropriate box and sup	ply the requisite in	nformation:		
Prior app	Continuation Divisional Lication information: Examiner	Continuation	n-in-part (CIP)	of prior applic Group/Art Uni	ation No/_ t:	
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only						
be relied upon when a portion has been inadvertently omitted from the submitted application parts. 18. CORRESPONDENCE ADDRESS						
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X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below						
NAME						
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City		State	· · · · · · · · · · · · · · · · · · ·		Zip Code	
Country		Telephone			Fax	

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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	44-20 =	24	X \$ 18.00 =	\$ 432.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	2-3 =	0	X \$ 80.00 =	\$ 0.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$270.00 =	\$
				BASIC FEE (37 CFR 1.16(a)	
			Total of	above Calculations =	\$ 1142.00
	Reduction by	50% for filing by small er	tity (Note 37 CFR 1.9,	1.27, 1.28).	
				TOTAL =	\$ 1142.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Mark A. Williamson - Reg. No. 33,628	
SIGNATURE	MarelMilliam	
DATE	April 11, 2001	